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PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

2001US406

									J (
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY							
то	TAL CLAIMS	1	12				Γ	RATE	FEE] [RATE	FEE						
FOR			NUMBER FILED		NUMBE	NUMBER EXTRA		BASIC FEE	370.00	OR	BASIC FEE	740.00						
TOTAL CHARGEABLE CLAIMS) 2 minus 20=		* Ø			X\$ 9=		OR	X\$18=							
INDEPENDENT CLAIMS			minus 3 =		* 0		ŀ	X42=		OR	X84=							
MULTIPLE DEPENDENT CLAIM P				-10 27	- 7					1								
			less than zero, enter "0" in column 2			olumn 2		+140=		OR	+280=	711 -						
∼ If								TOTAL		OR	TOTAL	740 THAN						
	Cl		MENDEC	NDED - PART II (Column 2) (Column 3)				SMALL ENTITY			OTHER THAN SMALL ENTITY							
_		(Column 1) CLAIMS			HEST	(Column 3)	r			1 1		ADDI-						
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVI	MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIONAL FEE						
NO.	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=							
ME	Independent	*	Minus	***			1 1	X42=		OR	X84=							
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ı ţ			1	1000							
					-	Y -		. +140=.		OR	+280=							
							_	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE							
		(Column 1)			umn 2)	(Column 3)												
8	Control of the 17th of the control o	CLAIMS REMAINING		NU	MBER	PRESENT	11	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL						
ENT	The second of th	AFTER AMENDMENT			/IOUSLY D FOR	EXTRA	11	MAIL	FEE		1.015	FEE						
AMENDMENT	Total	*	Minus	**		=	11	X\$ 9=		OR	X\$18=							
ME	Independent	*	Minus	+++		=	11	X42=		OR	X84=							
L	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	NT CLAIM		1	+140=		OR	+280=							
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		(Column 1)			umn 2)	(Column 3)				_								
		CLAIMS			GHEST IMBER	DDECENT	11		ADDI-	1		ADDI-						
C	and a second of the second	REMAINING AFTER	-	PREV	VIOUSLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL						
Ē	Management of one compatition to the	AMENDMENT		PAI	ID FOR		41		FEE	-		FEE						
AMENDMENT	Total	*	Minus	**		=	41	X\$ 9=		OR	X\$18=							
ME	independent	*	Minus	***	UT C:	=	11	X42=		OR	X84=							
ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CL				NI CLAIN	VI	 L	+140=		1		1						
١.	If the entry in and	umn 1 is less than	the entry in ac-	lumn 2 w	rite "0" in co	olumn 3.		+140= TOTAL	 	OR	TOTAL							
***	* If the "Highest Nu	umber Previously F	Paid For" IN Th	HIS SPACE	E is less that	nan 20, enter "20)."	TOTAL ADDIT. FEE		OR	ADDIT. FEE							
*	If the "Highest N" The "Highest ואטו	umber Previously mber Previously P	raid For" IN T. aid For" (Total	or Indepe	·⊏ is iess th ndent) is th	iaii 3, enter "3." ie highest numb	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											